

cases of Cheyne-Stokes' respiration, the pupils being dilated when the breathing was full and laboured, but progressively contracting during the descent and cessation of the respiration. This point has already engaged the attention of some observers; and in an article on Cheyne-Stokes' respiration, published in the *British Medical Journal* so long ago as August 31st, 1878, I mentioned that "Ziemssen and Biot noticed contraction of the pupils during the period of apnoea, relaxing during the period of respiration" (*loc. cit.* p. 310). That the rhythmical contractions also affected the muscles of the limbs gives additional interest to the first of the two cases now reported in THE LANCET.

I am, Sir, yours truly,
W. JULIUS MICKLE, M.D.

Grove Hall, London, Nov. 27th, 1886.

THE HYDROBROMATE OF HYOSCINE IN A CASE OF ATROPINE IRRITATION.

To the Editor of THE LANCET.

SIR,—In the last number of THE LANCET, Mr. Tweedy, in an article entitled "On the Mydriatic Properties of Hydrobromate of Hyoscine," mentioned some observations I had made on the action of this alkaloid. Since that was written I have used it in a case of atropine irritation, in which, after three applications of a two grains to the ounce solution of atropine considerable swelling and redness of the eyelids and of the side of the face had followed. The hyoscine was used three times a day for six days without the least irritation; the case was one of old iritis, in which iridectomy had been performed, and inflammatory symptoms were again commencing. It was very desirable that a mydriatic should be used. Under the influence of hyoscine the threatened attack entirely passed away. Should this happy result be confirmed by other cases, and should it also be found by extended experience not to produce delirium, as is often the case with duboisin, it will prove a very valuable drug.

I am, Sir, yours truly,

F. TREACHER COLLINS.

Royal London Ophthalmic Hospital, Moorfields, E.C., Dec., 1886.

To the Editor of THE LANCET.

SIR,—In the *Ophthalmic Review* for 1882 (p. 343) are some remarks of mine on this drug. My own experience was then confirmatory of that of Emmet of Berne,¹ and will be found to agree in the main with the interesting observations of Mr. Tweedy, in THE LANCET of Dec. 4th. Emmet stated that a drop of one-tenth per cent. of hyoscine solution was more rapid and more manifest on the pupillary sphincter and the accommodation than a drop of atropine solution of one-half per cent. I was able to bear out this statement, and was convinced that for rapid pupil dilatation and for paralysing the accommodation it was a valuable drug, and that its effects were as lasting as atropine, or more so. I used it both before and after writing the article in many cases of iritis, and found it more powerful than atropine for breaking down adhesions. Mr. Tweedy states that he has not yet met with any instance of its producing toxic effects. My experience was the reverse, and to mention the following facts is my chief object in writing this letter. Subsequently to publishing the article before referred to, at my request Messrs. Savory and Moore made with their well-known care gelatine discs for me of the hydrobromide, which they considered the most suitable salt for the purpose. The strength was, I believe, the same as the watery solution I then employed—viz., 1 in 1000. In two cases only were the discs used. One was a young lady with astigmatism, and it was employed for paralysing the accommodation prior to testing the refraction; the other was a middle-aged lady with iritic adhesions. I believe only one disc was used in each case, but in both unpleasant symptoms, giddiness, confusion of ideas, &c., and in the young lady especially, faintness supervened, very similar to what I had observed with duboisin, but perhaps less severe. The symptoms continued a good long time. Before this I had employed the watery solution in many cases, some for refraction, but mostly in place of atropine for iritis, and I do not now recall any ill effects. The salt used was the iodide. The conclusion I arrived at was

that in certain cases of iritis it was undoubtedly useful, but that it was more dangerous than atropine, and therefore it came to be less used by me. I have used and do use largely ophthalmic discs, and believe in their convenience, and I wish to guard against any impression prejudicial to their employment generally.

I am, Sir, yours truly,

SIMEON SNELL,
Ophthalmic Surgeon to the Sheffield
General Infirmary.

December, 1886.

THE PREVALENCE OF SHINGLES.

To the Editor of THE LANCET.

SIR,—There appears to be more than the usual amount of this troublesome, and frequently painful, malady just now. Dr. Aitken remarked, in an early edition of his Practice of Medicine, that "a special mystery envelops its origin"; and in the twenty years which have elapsed since this was written little has been done to clear up this mystery. No satisfactory explanation has been given why in one case the neuralgic pain, which sometimes is very intense, should precede the eruption, in another accompany it, and in a third succeed it. Fifty years ago Dr. Anthony Todd Thomson wrote that it might occur several times in the same individual, whilst more modern views favour the belief that one attack is prophylactic of another. That the malady is often intimately associated with some nerve trouble, there appears now no reason to doubt. But Sir Erasmus Wilson, in his last contribution on the subject, believed the *predisposing* cause to be the gouty or rheumatic diathesis, and that a chill acted only as a secondary or *exciting* cause. The present prevalence of the malady affords opportunities for further clinical observations. The relation of shingles and other forms of herpes to pneumonia is full of interest. Why should pneumonia be so frequently accompanied by herpes labialis, and so rarely by herpes zoster or shingles? And yet when shingles prevails largely pneumonia is apt to be prevalent also, but not in the same persons. It may be a consolation to some who are suffering intense pain from shingles to think that they have possibly just escaped an attack of the graver malady, pneumonia. Not that by this it is intended to imply that an attack of shingles is a trifle, for it frequently is accompanied by great prostration of the nervous system, causing irregularity of the heart's action, needing prolonged care to ensure entire restoration to health. Three typical cases have recently come under my care: in one the rash occupied one side of the neck—the right side; in another it followed the line of the external cutaneous nerve of the right thigh; and in the third it spread over the left half of the chest. In each of these cases the pain was very severe, and in two of them the heart's action was embarrassed, so as to produce an intermittent pulse and much præcordial distress. In the case affecting the neck this symptom was absent. In THE LANCET, vol. i. 1882, some interesting cases of trophic herpes are recorded. In calling to memory some fifty cases of fracture of the ribs, in no instance did any herpetic eruption follow the injury which the nerves must receive from this accident, though it is believed that there is some connexion between herpes zoster and nerve injury.

I am, Sir, yours obediently,

December, 1886.

A GENERAL PRACTITIONER.

MERLATT'S PULSE.

To the Editor of THE LANCET.

SIR,—There is a mistake in my letter of Dec. 1st, which appears in THE LANCET of Dec. 4th. The last paragraph on page 1104 should read, "The *sixth* tracing taken on the afternoon of the thirty-fourth day caused me some surprise, as it shows a temporary restoration of the blood." The *fifth* tracing shows the progressive diminution of volume, and was taken at the same hour as all the others (6 P.M.), except the fourth, which is that of the thirty-third *morning*, when the pulse was said by the medical men to be filiform, a condition well seen on the tracing. Since then the pulse has varied between 60 and 120 to the minute, being sometimes filiform, at others bounding. I must also ask your readers to insert the words "on the evening of the thirty-fourth day" after "if an enumeration had again been made," on page 1105.—I am, Sir, yours faithfully,

THE PARIS CORRESPONDENT OF THE LANCET.

Paris, Dec. 7th, 1886.

¹ Abstracted from the Archiv für Augenheilkunde, in Ann. d'Oculist., 1882, vol. ii., p. 51.